

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)
00000001

2 PAGE #
1 of 12

**3 CANDIDATE /
OFFICEHOLDER
NAME**

MS / MRS / MR FIRST MI
Mr. Robert

NICKNAME LAST SUFFIX
Bob Allen

OFFICE USE ONLYDate Received **RECEIVED**

APR 09 2009

City Secretary's Office

Date Hand-delivered or Date Postmarked

12:08 p.m.

Receipt #

Amount

Date Processed

Date Imaged

**4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS**

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

10601 Big Horn Trail
Frisco, TX 75035

☐ Change of Address

**5 CAMPAIGN
TREASURER
NAME**

MS / MRS / MR FIRST MI
Mr. Robert

NICKNAME LAST SUFFIX
Bob King

**6 CAMPAIGN
TREASURER
ADDRESS**

(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

8370 Fair Oaks
Frisco, TX 75034

**7 CAMPAIGN
TREASURER
PHONE**

AREA CODE PHONE NUMBER EXTENSION

(972) 712-2391

8 REPORT TYPE

☐ January 15
 ☒ 30th day before election
 ☐ Runoff
 ☐ 15th day after campaign treasurer appointment (officeholder only)

☐ July 15
 ☐ 8th day before election
 ☐ Exceeded \$500 limit
 ☐ Final report (Attach C/OH - FR)

**9 PERIOD
COVERED**

Month Day Year THROUGH Month Day Year

01/15/2009 04/08/2009

10 ELECTION

ELECTION DATE

Month Day Year

05/09/2009

ELECTION TYPE

☐ Primary
 ☐ Runoff
 ☒ General
 ☐ Special

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known)
Frisco City Council Place 1

**13 NOTICE
OF DIRECT
CAMPAIGN
EXPENDITURE
BY OTHER
INDIVIDUALS**

.. Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ..

Name

Address/PO Box; Apt. / Suite #; City; State; Zip Code

☐ additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Allen, Robert (Mr.)

15 ACCOUNT # (Ethics Commission filers)
0000000116 NOTICE
FROM
POLITICAL
COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

☐ additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION
TOTALS1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

0.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

4,479.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

14.93

4. TOTAL POLITICAL EXPENDITURES

\$

3,537.05

CONTRIBUTION
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

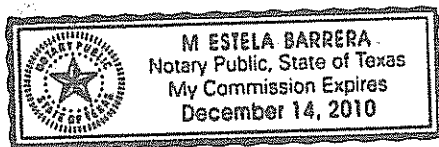
866.18

OUTSTANDING
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

0.00

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Bob Allen

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Robert Allen, this the 09th day of April, 2009, to certify which, witness my hand and seal of office.

Signature of officer administering oath

M. Estela Barrera
Print name of officer administering oath

Dr. Admaria Asst
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 1/5 Report: 3/12	
2 FILER NAME Allen, Robert (Mr.)			3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 02/05/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Abernethy, Dick (Mr.) 6 Contributor address; City; State; Zip Code 7422 Saint Petersburg St. Frisco, TX 75034		7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) Campaign Contribution
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)	
Date 01/15/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cash Donation, Unknown Contributor address; City; State; Zip Code Jan-15-2009 - Meet and Greet Frisco, TX 75034		Amount of contribution (\$) \$29.00	In-kind contribution description (if applicable) Unknown cash contribution collected at the Jan-15 Terilli's event
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 01/16/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clark, Neal (Mr.) Contributor address; City; State; Zip Code 5632 Mallard Trace Frisco, TX 75034		Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) Campaign Contribution
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 01/15/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Claunch, Sarah (Ms.) Contributor address; City; State; Zip Code 8660 Woodstream Dr. Frisco, TX 75034		Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable) Campaign Contribution
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 02/28/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Floyd, Mike (Mr.) Contributor address; City; State; Zip Code 8669 Crestview Drive Frisco, TX 75034		Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable) Campaign Contribution
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/5 Report: 4/12	
2 FILER NAME Allen, Robert (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 01/15/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gibson, Al (Mr.) 6 Contributor address; City; State; Zip Code PO Box 37 Frisco, TX 75034	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) Campaign Contribution
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 02/10/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) HNTB Holdings LTD - Political Action Committee Contributor address; City; State; Zip Code 715 Kirk Drive Kansas City, MO 64105	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable) Campaign Contribution
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/29/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hoxie, John (Mr.) Contributor address; City; State; Zip Code 1879 Darnell Circle Frisco, TX 75034	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) Campaign Contribution
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/15/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) King, Bob (Mr.) Contributor address; City; State; Zip Code 8370 Fair Oaks Frisco, TX 75034	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) Campaign Contribution
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02/22/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McConnell, Joni (Ms.) Contributor address; City; State; Zip Code 15741 Big Horn Trail Frisco, TX 75035	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) Campaign Contribution
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/5 Report: 5/12	
2 FILER NAME Allen, Robert (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 02/09/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McKeehan, Mark (Mr.) 6 Contributor address; City; State; Zip Code 4805 Augusta Drive Frisco, TX 75034	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable) Campaign Contribution (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 01/26/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Milburn, Rita (Ms.) Contributor address; City; State; Zip Code 5651 Gadwall Drive Frisco, TX 75034	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) Campaign Contribution (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/15/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moss, Chris (Mr.) Contributor address; City; State; Zip Code 11436 Eaglebend Ln. Frisco, TX 75035	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) Campaign Contribution (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/08/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Partee, Stan (Mr.) Contributor address; City; State; Zip Code 10500 Last Stand Frisco, TX 75035	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) Campaign Contribution (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/15/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pittenger, Bill (Mr.) Contributor address; City; State; Zip Code 8595 Meadow Hill Dr. Frisco, TX 75035	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) Campaign Contribution (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/5 Report: 6/12	
2 FILER NAME Allen, Robert (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 01/15/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Seel, Kathy (Ms.) 6 Contributor address; City; State; Zip Code 10740 Big Horn Trail Frisco, TX 75035	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable) Campaign Contribution (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 01/15/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sowell, Will (Mr.) Contributor address; City; State; Zip Code 6101 Wilmington Dr. Frisco, TX 75035	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) Campaign Contribution (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/20/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sowle, James (Mr.) Contributor address; City; State; Zip Code 4703 Gables Court Frisco, TX 75035	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) Campaign Contribution via PayPal (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/15/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tubbs, Driskoll (Mr.) Contributor address; City; State; Zip Code 4909 Plantation Ln. Frisco, TX 75035	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) Campaign Contribution (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 01/15/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Valdez, Glendy (Ms.) Contributor address; City; State; Zip Code 5112 Lakeland Dr. Frisco, TX 75035	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) Campaign Contribution (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/5 Report: 7/12

2 FILER NAME Allen, Robert (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00000001

4 Date

03/15/2009

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Westbrook, Carol (Ms.)**6** Contributor address; City; State; Zip Code
4009 Stratford Drive
Frisco, TX 75035**7** Amount of
contribution (\$)

\$150.00

8 In-kind contribution
description (if applicable)
In-Kind - Printing,
design, cards, envelopes(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

PLEDGED CONTRIBUTIONS**SCHEDULE B**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 8/12	
2 FILER NAME Allen, Robert (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 TOTAL OF UNITEMIZED PLEDGES: ⇌ ⇌ ⇌ ⇌ ⇌ ⇌		\$	
5 Date 03/27/2009	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Texas Association of Realtors PAC 7 Pledgor address; City; State; Zip Code 6821 Colt Road Plano, TX 75024	8 Amount of pledge (\$) \$750.00	9 In-kind description (if applicable) Contribution and Endorsement from Collin County Association of Realtors (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/3 Report: 9/12
2 FILER NAME Allen, Robert (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date 01/26/2009	5 Payee name Allen, Robert (Mr.) 6 Payee address; City; State; Zip Code 10601 Big Horn Trail Frisco, TX 75035	7 Amount (\$) \$373.84
8 Purpose of payment (See instructions regarding type of information required.) Reimbursement of expenses from personal funds, previously flagged as 'reimbursement' (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 04/02/2009	Payee name First Graphic Services, Inc Payee address; City; State; Zip Code 229 Garvon Street Garland, TX 75040	Amount (\$) \$831.36
Purpose of payment (See instructions regarding type of information required.) Yard Signs (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 03/12/2009	Payee name Frisco Style Magazine Payee address; City; State; Zip Code PO Box 1676 Frisco, TX 75034	Amount (\$) \$1,632.00
Purpose of payment (See instructions regarding type of information required.) Two ads in April Issue of Frisco Style Magazine - Check #1002 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 01/15/2009	Payee name Kinko's Frisco Payee address; City; State; Zip Code 8290 Hwy 121 Frisco, TX 75034	Amount (\$) \$302.02
Purpose of payment (See instructions regarding type of information required.) Tri-fold marketing brochures (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/3 Report: 10/12
2 FILER NAME Allen, Robert (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001

4 Date 02/09/2009	5 Payee name PayPal 6 Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	7 Amount (\$) \$4.65
8 Purpose of payment (See instructions regarding type of information required.) PayPal Processing Fee (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

Date 03/19/2009	Payee name PayPal Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	Amount (\$) \$12.80
Purpose of payment (See instructions regarding type of information required.) PayPal Processing Fee (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

Date 03/20/2009	Payee name PayPal Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	Amount (\$) \$3.20
Purpose of payment (See instructions regarding type of information required.) PayPal Processing Fee (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

Date 02/06/2009	Payee name Staples Payee address; City; State; Zip Code 500 Staples Drive Framingham, MA 01702	Amount (\$) \$80.34
Purpose of payment (See instructions regarding type of information required.) Campaign Team Nametags (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/3 Report: 11/12
2 FILER NAME Allen, Robert (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date 01/15/2009	5 Payee name Terilli's Frisco 6 Payee address; City; State; Zip Code 4226 Preston Rd. Frisco, TX 75035	7 Amount (\$) \$262.91
8 Purpose of payment (See instructions regarding type of information required.) Food for the Jan-15 Meet and Greet event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS****SCHEDULE G**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/1 Report: 12/12

2 FILER NAME Allen, Robert (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

03/01/2009

5 Payee name

iContact

6 Payee address; City; State; Zip Code2635 Meridian Pkwy
Durham, NC 27713**8** Amount
(\$)

\$19.00

7 Purpose of expenditure (See instructions regarding type of information required.)
iContact List Serve Mailing List - March, 2009(If travel outside of Texas, complete Schedule T) ☐Reimbursement
from political
contributions
intended